

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31.

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

598

Lobbyist's Registration Number

### FOR OFFICE USE ONLY

Postmark Date: 11/3/98

REG

1981555

11/3/98  
\$10.00  
Wm

1. NAME Hodgkins William E.  
Last First MI

2. BUSINESS PHONE (504) 767-1460  
Area Code and Phone Number

3. BUSINESS ADDRESS 10636 Linkwood Court, Baton Rouge, LA 70810  
Street and No. City State Zip

4. EMPLOYER Schwab and Walter

5. EMPLOYER'S ADDRESS 10636 Linkwood Court, Baton Rouge, LA 70810  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name ☒ The Association of Louisiana Electric Cooperatives, Inc.

Address 10725 Airline Highway, Baton Rouge, LA 70816

Business or purpose Rural Electrification

Does this person pay you? No

If No, who pays you? Schwab and Walter

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

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598
Lobbyist's Registration Number

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of Louisiana  
Parish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared William F. Hodgkins, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

William F. Hodgkins  
Signature of Lobbyist

Sworn to and subscribed before me on this 13th day of  
January, 19 98

Notary Public

Rev. 8/97

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY

